

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the Accusation
Against:**

Stephen David Taus, M.D.

Case No. 800-2016-022030

**Physician's and Surgeon's
Certificate No. G 24011**

Respondent


DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on October 12, 2018.

IT IS SO ORDERED: September 12, 2018.

MEDICAL BOARD OF CALIFORNIA



**Kristina D. Lawson, J.D., Chair
Panel B**

1 XAVIER BECERRA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 JASON J. AHN
Deputy Attorney General
4 State Bar No. 253172
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8 *Attorneys for Complainant*

10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

Case No. 800-2016-022030

14 **STEPHEN DAVID TAUS, M.D.**
1366 W. 7th Street
15 San Pedro, CA 90732

OAH No. 2017120295

16 **Physician's and Surgeon's Certificate**
No. G 24011

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

17
18 Respondent.

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20 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
21 entitled proceedings that the following matters are true:

22 **PARTIES**

23 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
24 of California (Board). She brought this action solely in her official capacity and is represented in
25 this matter by Xavier Becerra, Attorney General of the State of California, by Jason J. Ahn,
26 Deputy Attorney General.

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2. Respondent Stephen David Taus, M.D. (Respondent) is represented in this proceeding by attorney Raymond J. McMahon, Esq., whose address is: 5440 Trabuco Road Irvine, California 92620.

3. On or about January 26, 1973, the Board issued Physician's and Surgeon's Certificate No. G 24011 to Stephen David Taus, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2016-022030, and will expire on June 30, 2020, unless renewed.

JURISDICTION

4. On or about November 15, 2017, Accusation No. 800-2016-022030 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on November 15, 2017. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2016-022030 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and fully understands the charges and allegations in Accusation No. 800-2016-022030. Respondent has also carefully read, fully discussed with counsel, and fully understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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CULPABILITY

9. Respondent does not contest that, at an administrative hearing, Complainant could establish a *prima facie* case with respect to the charges and allegations contained in Accusation No. 800-2016-022030 and that he has thereby subjected his license to disciplinary action.

10. Respondent agrees that if he ever petitions for early termination or modification of probation, or if the Board ever petitions for revocation of probation, all of the charges and allegations contained in Accusation No. 800-2016-022030 shall be deemed true, correct and fully admitted by respondent for purposes of that proceeding or any other licensing proceeding involving respondent in the State of California

11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

CONTINGENCY

12. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

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1 **ADDITIONAL PROVISIONS**

2 13. This Stipulated Settlement and Disciplinary Order is intended by the parties herein
3 to be an integrated writing representing the complete, final, and exclusive embodiment of the
4 agreements of the parties in the above-entitled matter.

5 14. The parties agree that copies of this Stipulated Settlement and Disciplinary Order,
6 including copies of the signatures of the parties, may be used in lieu of original documents and
7 signatures and, further, that such copies shall have the same force and effect as originals.

8 15. In consideration of the foregoing admissions and stipulations, the parties agree the
9 Board may, without further notice to or opportunity to be heard by Respondent, issue and enter
10 the following Disciplinary Order:

11 **DISCIPLINARY ORDER**

12 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 24011 issued
13 to Respondent Stephen David Taus, M.D. is revoked. However, the revocation is stayed and
14 Respondent is placed on probation for three (3) years from the effective date of the Decision and
15 Order on the following terms and conditions.

16 1. **CONTROLLED SUBSTANCES - MAINTAIN RECORDS AND ACCESS TO**
17 **RECORDS AND INVENTORIES.** Respondent shall maintain a record of all controlled
18 substances ordered, prescribed, dispensed, administered, or possessed by Respondent, and any
19 recommendation or approval which enables a patient or patient's primary caregiver to possess or
20 cultivate marijuana for the personal medical purposes of the patient within the meaning of Health
21 and Safety Code section 11362.5, during probation, showing all of the following: 1) the name and
22 address of the patient; 2) the date; 3) the character and quantity of controlled substances involved;
23 and 4) the indications and diagnosis for which the controlled substances were furnished.

24 Respondent shall keep these records in a separate file or ledger, in chronological order. All
25 records and any inventories of controlled substances shall be available for immediate inspection
26 and copying on the premises by the Board or its designee at all times during business hours and
27 shall be retained for the entire term of probation.

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1 2. EDUCATION COURSE. Within 60 calendar days of the effective date of this
2 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
3 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours
4 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
5 correcting any areas of deficient practice or knowledge, shall be Category I certified, and for each
6 year of probation, at least twenty (20) out of the forty (40) hours shall include the areas of pain
7 management and/or depression/anxiety/mental health issues. The educational program(s) or
8 course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical
9 Education (CME) requirements for renewal of licensure. Following the completion of each
10 course, the Board or its designee may administer an examination to test Respondent's knowledge
11 of the course. Respondent shall provide proof of attendance for 65 hours of CME of which 40
12 hours were in satisfaction of this condition.

13 3. PRESCRIBING PRACTICES COURSE. Within 60 calendar days of the effective
14 date of this Decision, Respondent shall enroll in a course in prescribing practices approved in
15 advance by the Board or its designee. Respondent shall provide the approved course provider
16 with any information and documents that the approved course provider may deem pertinent.
17 Respondent shall participate in and successfully complete the classroom component of the course
18 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
19 complete any other component of the course within one (1) year of enrollment. The prescribing
20 practices course shall be at Respondent's expense and shall be in addition to the Continuing
21 Medical Education (CME) requirements for renewal of licensure.

22 A prescribing practices course taken after the acts that gave rise to the charges in the
23 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
24 or its designee, be accepted towards the fulfillment of this condition if the course would have
25 been approved by the Board or its designee had the course been taken after the effective date of
26 this Decision.

27 Respondent shall submit a certification of successful completion to the Board or its
28 designee not later than 15 calendar days after successfully completing the course, or not later than

1 15 calendar days after the effective date of the Decision, whichever is later.

2 4. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective
3 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in
4 advance by the Board or its designee. Respondent shall provide the approved course provider
5 with any information and documents that the approved course provider may deem pertinent.
6 Respondent shall participate in and successfully complete the classroom component of the course
7 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
8 complete any other component of the course within one (1) year of enrollment. The medical
9 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing
10 Medical Education (CME) requirements for renewal of licensure.

11 A medical record keeping course taken after the acts that gave rise to the charges in the
12 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
13 or its designee, be accepted towards the fulfillment of this condition if the course would have
14 been approved by the Board or its designee had the course been taken after the effective date of
15 this Decision.

16 Respondent shall submit a certification of successful completion to the Board or its
17 designee not later than 15 calendar days after successfully completing the course, or not later than
18 15 calendar days after the effective date of the Decision, whichever is later.

19 5. MONITORING - PRACTICE. Within 30 calendar days of the effective date of this
20 Decision, Respondent shall submit to the Board or its designee for prior approval as a practice
21 monitor, the name and qualifications of one or more licensed physicians and surgeons whose
22 licenses are valid and in good standing, and who are preferably American Board of Medical
23 Specialties (ABMS) certified. A monitor shall have no prior or current business or personal
24 relationship with Respondent, or other relationship that could reasonably be expected to
25 compromise the ability of the monitor to render fair and unbiased reports to the Board, including
26 but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree
27 to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

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1 The Board or its designee shall provide the approved monitor with copies of the Decision(s)
2 and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the
3 Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed
4 statement that the practice monitor has read the Decision(s) and Accusation(s), fully understands
5 the role of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor
6 disagrees with the proposed monitoring plan, the monitor shall submit a revised monitoring plan
7 with the signed statement for approval by the Board or its designee.

8 Within 60 calendar days of the effective date of this Decision, and continuing throughout
9 probation, Respondent's practice shall be monitored by the approved monitor. Respondent shall
10 make all records available for immediate inspection and copying on the premises by the monitor
11 at all times during business hours and shall retain the records for the entire term of probation.

12 If Respondent fails to obtain approval of a monitor within 60 calendar days of the effective
13 date of this Decision, Respondent shall receive a notification from the Board or its designee to
14 cease the practice of medicine within three (3) calendar days after being so notified. Respondent
15 shall cease the practice of medicine until a monitor is approved to provide monitoring
16 responsibility.

17 The monitor(s) shall submit a quarterly written report to the Board or its designee which
18 includes an evaluation of Respondent's performance, indicating whether Respondent's practices
19 are within the standards of practice of medicine, and whether Respondent is practicing medicine
20 safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure
21 that the monitor submits the quarterly written reports to the Board or its designee within 10
22 calendar days after the end of the preceding quarter.

23 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
24 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
25 name and qualifications of a replacement monitor who will be assuming that responsibility within
26 15 calendar days. If Respondent fails to obtain approval of a replacement monitor within 60
27 calendar days of the resignation or unavailability of the monitor, Respondent shall receive a
28 notification from the Board or its designee to cease the practice of medicine within three (3)

1 calendar days after being so notified. Respondent shall cease the practice of medicine until a
2 replacement monitor is approved and assumes monitoring responsibility.

3 In lieu of a monitor, Respondent may participate in a professional enhancement program
4 approved in advance by the Board or its designee that includes, at minimum, quarterly chart
5 review, semi-annual practice assessment, and semi-annual review of professional growth and
6 education. Respondent shall participate in the professional enhancement program at Respondent's
7 expense during the term of probation.

8 6. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
9 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
10 Chief Executive Officer at every hospital where privileges or membership are extended to
11 Respondent, at any other facility where Respondent engages in the practice of medicine,
12 including all physician and locum tenens registries or other similar agencies, and to the Chief
13 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
14 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
15 calendar days.

16 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

17 7. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
18 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
19 advanced practice nurses.

20 8. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
21 governing the practice of medicine in California and remain in full compliance with any court
22 ordered criminal probation, payments, and other orders.

23 9. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
24 under penalty of perjury on forms provided by the Board, stating whether there has been
25 compliance with all the conditions of probation.

26 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
27 of the preceding quarter.

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1 10. GENERAL PROBATION REQUIREMENTS.

2 Compliance with Probation Unit

3 Respondent shall comply with the Board's probation unit.

4 Address Changes

5 Respondent shall, at all times, keep the Board informed of Respondent's business and
6 residence addresses, email address (if available), and telephone number. Changes of such
7 addresses shall be immediately communicated in writing to the Board or its designee. Under no
8 circumstances shall a post office box serve as an address of record, except as allowed by Business
9 and Professions Code section 2021(b).

10 Place of Practice

11 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
12 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
13 facility.

14 License Renewal

15 Respondent shall maintain a current and renewed California physician's and surgeon's
16 license.

17 Travel or Residence Outside California

18 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
19 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
20 (30) calendar days.

21 In the event Respondent should leave the State of California to reside or to practice,
22 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
23 departure and return.

24 11. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
25 available in person upon request for interviews either at Respondent's place of business or at the
26 probation unit office, with or without prior notice throughout the term of probation.

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1 12. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
2 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
3 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
4 defined as any period of time Respondent is not practicing medicine as defined in Business and
5 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
6 patient care, clinical activity or teaching, or other activity as approved by the Board. If
7 Respondent resides in California and is considered to be in non-practice, Respondent shall
8 comply with all terms and conditions of probation. All time spent in an intensive training
9 program which has been approved by the Board or its designee shall not be considered non-
10 practice and does not relieve Respondent from complying with all the terms and conditions of
11 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
12 on probation with the medical licensing authority of that state or jurisdiction shall not be
13 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
14 period of non-practice.

15 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
16 months, Respondent shall successfully complete the Federation of State Medical Boards's Special
17 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
18 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
19 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

20 Respondent's period of non-practice while on probation shall not exceed two (2) years.

21 Periods of non-practice will not apply to the reduction of the probationary term.

22 Periods of non-practice for a Respondent residing outside of California will relieve
23 Respondent of the responsibility to comply with the probationary terms and conditions with the
24 exception of this condition and the following terms and conditions of probation: Obey All Laws;
25 General Probation Requirements; and Quarterly Declarations.

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1 13. COMPLETION OF PROBATION. Respondent shall comply with all financial
2 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
3 completion of probation. Upon successful completion of probation, Respondent's certificate shall
4 be fully restored.

5 14. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
6 of probation is a violation of probation. If Respondent violates probation in any respect, the
7 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
8 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,
9 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have
10 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
11 the matter is final.

12 15. LICENSE SURRENDER. Following the effective date of this Decision, if
13 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
14 the terms and conditions of probation, Respondent may request to surrender his or her license.
15 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
16 determining whether or not to grant the request, or to take any other action deemed appropriate
17 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
18 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
19 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
20 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
21 application shall be treated as a petition for reinstatement of a revoked certificate.

22 16. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
23 with probation monitoring each and every year of probation, as designated by the Board, which
24 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
25 California and delivered to the Board or its designee no later than January 31 of each calendar
26 year.


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ACCEPTANCE

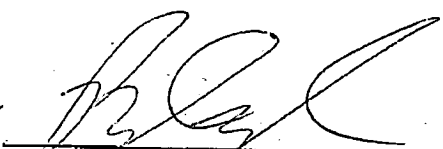
I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Raymond J. McMahon, Esq. I fully understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and fully agree to be bound by the Decision and Order of the Medical Board of California.

DATED:

7/17/18
STEPHEN DAVID TAUS, M.D.
Respondent

I have read and fully discussed with Respondent Stephen David Taus, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED:

July 17, 2018
RAYMOND J. MCMAHON, ESQ.
Attorney for Respondent

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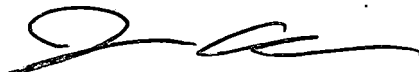
ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated: *Jul 18, 2018*

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
MATTHEW M. DAVIS
Supervising Deputy Attorney General



JASON J. AHN
Deputy Attorney General
Attorneys for Complainant

Exhibit A

Accusation No. 800-2016-022030

1 XAVIER BECERRA
2 Attorney General of California
3 MATTHEW M. DAVIS
4 Supervising Deputy Attorney General
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14 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO Nov 15 2017
BY: [Signature] ANALYST

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BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

29 In the Matter of the Accusation Against:

Case No. 800-2016-022030

30 Stephen David Taus, M.D.
31 1366 W. 7th Street
32 San Pedro, CA 90732

ACCUSATION

33 Physician's and Surgeon's Certificate
34 No. G24011,

Respondent.

35 Complainant alleges:

PARTIES

36 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
37 capacity as the Executive Director of the Medical Board of California, Department of Consumer
38 Affairs (Board).

39 2. On or about January 26, 1973, the Medical Board issued Physician's and Surgeon's
40 Certificate Number G24011 to Stephen David Taus, M.D. (Respondent). The Physician's and
41 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
42 herein and will expire on June 30, 2018, unless renewed.

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

4. Section 2227 of the Code states, in pertinent part:

“(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the division, may, in accordance with the provisions of this chapter:

“(1) Have his or her license revoked upon order of the board.

“(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

“(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

“(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.

“(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.

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1 5. Section 2234 of the Code states:

2 “The board shall take action against any licensee who is charged with
3 unprofessional conduct. In addition to other provisions of this article,
4 unprofessional conduct includes, but is not limited to, the following:

5 “(a) Violating or attempting to violate, directly or indirectly, assisting in or
6 abetting the violation of, or conspiring to violate any provision of this chapter.

7 “(b) Gross negligence.

8 “(c) Repeated negligent acts. To be repeated, there must be two or more
9 negligent acts or omissions. An initial negligent act or omission followed by a
10 separate and distinct departure from the applicable standard of care shall constitute
11 repeated negligent acts.

12 “(1) An initial negligent diagnosis followed by an act or omission medically
13 appropriate for that negligent diagnosis of the patient shall constitute a single
14 negligent act.

15 “(2) When the standard of care requires a change in the diagnosis, act, or
16 omission that constitutes the negligent act described in paragraph (1), including,
17 but not limited to, a reevaluation of the diagnosis or a change in treatment, and the
18 licensee's conduct departs from the applicable standard of care, each departure
19 constitutes a separate and distinct breach of the standard of care.

20 “...”

21 6. Section 2241.5 of the Code states:

22 “(a) A physician and surgeon may prescribe for, or dispense or administer to,
23 a person under his or her treatment for a medical condition dangerous drugs or
24 prescription controlled substances for the treatment of pain or a condition causing
25 pain, including, but not limited to, intractable pain.

26 “(b) No physician and surgeon shall be subject to disciplinary action for
27 prescribing, dispensing, or administering dangerous drugs or prescription
28 controlled substances in accordance with this section.

1 “(c) This section shall not affect the power of the board to take any action
2 described in Section 2227 against a physician and surgeon who does any of the
3 following:

4 “(1) Violates subdivision (b), (c), or (d) of Section 2234 regarding gross
5 negligence, repeated negligent acts, or incompetence.

6 “...

7 “(5) Fails to keep complete and accurate records of purchases and disposals of
8 substances listed in the California Uniform Controlled Substances Act (Division
9 10 (commencing with Section 11000) of the Health and Safety Code) or controlled
10 substances scheduled in the federal Comprehensive Drug Abuse Prevention and
11 Control Act of 1970 (21 U.S.C. Sec. 801 et seq.), or pursuant to the federal
12 Comprehensive Drug Abuse Prevention and Control Act of 1970. A physician and
13 surgeon shall keep records of his or her purchases and disposals of these controlled
14 substances or dangerous drugs, including the date of purchase, the date and records
15 of the sale or disposal of the drugs by the physician and surgeon, the name and
16 address of the person receiving the drugs, and the reason for the disposal or the
17 dispensing of the drugs to the person, and shall otherwise comply with all state
18 recordkeeping requirements for controlled substances.

19 “...

20 “(7) Prescribes, administers, or dispenses in violation of this chapter, or in
21 violation of Chapter 4 (commencing with Section 11150) or Chapter 5
22 (commencing with Section 11210) of Division 10 of the Health and Safety Code.

23 “(d) A physician and surgeon shall exercise reasonable care in determining
24 whether a particular patient or condition, or the complexity of a patient’s
25 treatment, including, but not limited to, a current or recent pattern of drug abuse,
26 requires consultation with, or referral to, a more qualified specialist.

27 “...”

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1 7. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain
2 adequate and accurate records relating to the provision of services to their patients constitutes
3 unprofessional conduct."

4 8. Unprofessional conduct under Business and Professions Code section 2234 is
5 conduct which breaches the rules or ethical code of the medical profession, or conduct
6 which is unbecoming a member in good standing of the medical profession, and which
7 demonstrates an unfitness to practice medicine. (*Shea v. Board of Medical Examiners*
8 (1978) 81 Cal.App.3d 564, 575.)

9 **FIRST CAUSE FOR DISCIPLINE**

10 **(Gross Negligence)**

11 9. Respondent has subjected his Physician's and Surgeon's Certificate No.
12 G24011 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
13 subdivision (b), of the Code, in that Respondent committed gross negligence in his care and
14 treatment of patient B.M., as more particularly alleged hereinafter:

15 **Patient B.M.**

16 (a) Patient B.M. had been under the primary care of Respondent from 2006 through
17 2014.¹ Throughout 2006-2014, patient B.M. suffered from depression, anxiety, and/or other
18 psychiatric illnesses and received treatment from psychiatrists. Respondent neither regularly
19 communicated with patient B.M.'s psychiatrists nor adequately coordinated care of Patient B.M.
20 with them. Patient B.M. also had chronic neck and back pains.

21 (b) Regarding patient B.M.'s back pain, Respondent failed to adequately utilize non-
22 opiate methods of treatment such as physical therapy and/or anti-inflammatory medications and
23 anti-seizure medications.

24 (c) From 2013 through 2014, Respondent regularly prescribed various controlled
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27 ¹ Conduct occurring more than seven (7) years from the filing date of this Accusation is
28 for informational purposes only and is not alleged as a basis for disciplinary action.

1 substances to patient B.M., including, but not limited to, benzodiazepines,² opiates,³ and stimulant
2 psychotropic medications.

3 (d) Throughout 2014, Respondent prescribed both benzodiazepines and opiates,
4 concurrently, to patient B.M. However, despite the significantly increased risk of potentially fatal
5 overdose caused by the concurrent usage of benzodiazepine and opiates, Respondent neither
6 attempted to taper off patient B.M.'s use of opiates while he was concurrently using
7 benzodiazepines, nor prescribed antidote therapy to patient B.M. for the concurrent usage of
8 benzodiazepines and opiates.

9 (e) During the course of treating patient B.M., including the time period Respondent
10 prescribed controlled substances to him in 2013 and 2014, Respondent did not have a pain
11 management contract with patient B.M.; Respondent did not review CURES reports⁴ to determine
12 whether patient B.M. was engaged in doctor shopping for pills; Respondent did not have a pain
13 management treatment plan for patient B.M.; and Respondent did not monitor the efficacy of
14 opioids on patient B.M.

15 (f) Patient B.M. committed suicide on January 1, 2015, leaving a suicide note stating that
16 he wanted help, but was only given the pills, which ultimately killed him.

17 (g) Respondent committed gross negligence in his care and treatment of patient B.M.,
18 which included, but were not limited to:

19 (h) Respondent failed to properly prescribe and monitor patient B.M.'s use of, and
20 response to, opiate pain medications; and

21 (i) Respondent neither regularly communicated with patient B.M.'s psychiatrists nor
22 adequately coordinated care of Patient B.M. with them.

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24 ² Benzodiazepines are classified as schedule IV depressants under the Controlled
25 Substances Act and are generally used for anxiety, insomnia, and other ailments.

26 ³ Opiates include a variety of controlled substances that depress or slow down the body's
central nervous system.

27 ⁴ CURES is the Controlled Substances Utilization Review and Evaluation System
28 (CURES), a database of schedule II, III, and IV controlled substance prescriptions dispensed in
California, serving the public health, regulatory oversight agencies, and law-enforcement.

1 **SECOND CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts)**

3 10. Respondent has further subjected his Physician's and Surgeon's Certificate No.
4 G24011 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
5 subdivision (c), of the Code, in that he committed repeated negligent acts, as more particularly
6 alleged hereinafter:

7 (a) Paragraph 9(a) through (i) above, are incorporated by reference and realleged as if
8 fully set forth herein.

9 (b) Respondent committed repeated negligent acts which included, but were not limited
10 to, the following:

11 (c) Regarding patient B.M.'s back pain, Respondent failed to adequately utilize non-
12 opiate methods of treatment such as physical therapy and/or anti-inflammatory medications and
13 anti-seizure medications;

14 (d) Respondent neither attempted to taper off patient B.M.'s use of opiates while he was
15 concurrently using benzodiazepines, nor prescribed antidote therapy to patient B.M. for the
16 concurrent usage of benzodiazepines and opiates; and

17 (e) Respondent failed to maintain adequate and accurate medical records of patient B.M.

18 **THIRD CAUSE FOR DISCIPLINE**

19 **(Failure to Maintain Adequate and Accurate Records)**

20 11. Respondent has further subjected his Physician's and Surgeon's Certificate Number
21 G24011 to disciplinary action under sections 2227 and 2234, as defined by section 2266, of the
22 Code, in that he failed to maintain adequate and accurate records relating to his care and treatment
23 of patient B.M., as more particularly alleged hereinafter.

24 12. Paragraphs 9 through 10, above, are hereby incorporated by reference and realleged
25 as if fully set forth herein.

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FOURTH CAUSE FOR DISCIPLINE

(General Unprofessional Conduct)

13. Respondent has further subjected his Physician's and Surgeon's Certificate No. G24011 to disciplinary action under sections 2227 and 2234 of the Code, in that he has engaged in conduct which breaches the rules or ethical code of the medical profession, or conduct which is unbecoming to a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine, as more particularly alleged hereinafter.


14. Paragraphs 9 through 12, above, which are hereby incorporated by reference as if fully set forth herein.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

1. Revoking or suspending Physician's and Surgeon's Certificate Number G24011, issued to Stephen David Taus, M.D.;
2. Revoking, suspending or denying approval of Stephen David Taus, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Stephen David Taus, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: November 15, 2017


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant